

1 **SUBCHAPTER 27I- AREA AUTHORITY OR COUNTY PROGRAM REQUIREMENTS**

2 **SECTION .0600-NON-MEDICAID APPEAL PROCESS**

3 **10A NCAC 10A NCAC 27I .0601** is adopted as published in NC Register Volume 20 Issue 20 Pages 1713-1716 as
4 follows:

5 **10A NCAC 10A NCAC 27I .0601 SCOPE**

- 6 (a) The rules of this Section shall govern appeals made to the Division of decisions made by an area authority or
7 county program affecting a non-Medicaid eligible client.
- 8 (b) A non-Medicaid eligible client may appeal to the Director the review decision of an area authority or county
9 program to deny, reduce, suspend, or terminate a non-Medicaid state funded service.
- 10 (c) An appeal shall be filed with the Division only after a client has received a review decision from the area
11 authority or county program.
- 12 (d) Nothing in these rules shall be interpreted as granting a non-Medicaid eligible client the right to appeal
13 decisions of third party payers to the Division.
- 14 (e) As set forth in G.S. 143B-147(a)(9), nothing in these rules shall be interpreted as granting a non-Medicaid
15 eligible client the right to appeal the findings of the Division by requesting a contested case hearing pursuant to
16 G.S. 150B.
- 17 (f) There shall be no reprisal or retaliation to anyone who is a party to an appeal.
- 18 (g) The area authority or county program may authorize interim services until the final written decision as set forth
19 in Rule .0609 of this Section is reached.

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21 *Authority G.S. 143B-147;*

22 *Effective Date October 1, 2006*